

LETTERS *to the Editor*

"The Liberated Sex"— Catchy, or Pejorative?

To the Editor: Recently I received in the mail a notice for a symposium entitled "Pelvic Cancer in the Liberated Sex" co-sponsored by the American Cancer Society and the California Medical Association. I am delighted that such a program is being provided for the physicians practicing in the greater San Francisco area; however, it is distressing that a symposium on such important subjects as uterine and ovarian cancer should be introduced with the flippancy and the inherent, subtle put-down that is implied in the term "liberated sex."

I have shown the announcement to many colleagues both male and female, as well as many other professional and nonprofessional people and uniformly they have reacted with as much distaste and irritation as I have. All asked "now what is that supposed to mean?" All felt the title reflects a lack of sensitivity to and understanding of the changes occurring in our society. You should no more talk about pelvic cancer in the "liberated sex" than you would talk about sickle cell anemia in the "jive race." Inherent in both of these expressions is the kind of subtle and (presumably) unintentional, implied but unstated prejudice which is the most difficult to combat because it is so insidious. Organizations

such as the American Cancer Society and the California Medical Association because of the respect they command and the influence they exert must take the lead in avoiding this kind of implied discrimination.

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Council Member,
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Dear Dr. Pick: Thank you for your letter concerning the title of the symposium on female pelvic cancer. We appreciate your very honest comments.

On behalf of the planning committee, I would like to assure you that the use of the term "The Liberated Sex" was not intended to be offensive or to indicate lack of our respect for women.

Often the title of an excellent program is so unimaginative that it does not receive more than a first glance. Our primary purpose for selecting this title was to attract attention and stimulate interest.

We regret that this has caused you concern and we will try to avoid any possibility of similar misinterpretations in the future.

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Use of the Water Bed

To the Editor: I read the brief summary of the use of the water bed in the January, 1972, issue [Important Advances in Clinical Medicine:

Epitomes of Progress — Plastic Surgery]. Since you note "Clinical data is accumulating . . ." and "The water bed represents an important advance in the care of patients with paraplegia, stroke, spinal cord injury, and geriatric problems," I send you the following which I found in *Miss Beecher's Domestic Receipt Book* published in 1846 (Tenth Edition, 1852).

M. E. MOTTRAM, M.D.
San Francisco

The drawing at Fig. 5 represents a contrivance for the sick, which ought to be prepared in every village, to rent out to those who need it.

Fig. 5.



It is called the *Water Bed*, or *Hydrostatic Couch*, and is made at an expense of from twelve to fifteen dollars. The object of it is to relieve the sufferings of those who, from extreme emaciation, or from ulcers, or bed sores, are great sufferers from the pressure of the bed on these sore places. This kind of bed proves a great relief from this kind of suffering.

It consists of a wooden box, six feet long, and two feet and a half wide at the top, and the sides gradually sloping inward, making it fourteen inches deep. This is lined with sheet zinc, to make it water tight. Over this is thrown, and fastened to the edge of the box, a sheet of thick India rubber, water-proof cloth, large enough for an entire lining to the inside of the box. The edges of it are first made to adhere to the upper edge of the box with spirit varnish, and then a thin strip of board is nailed on, to fasten it firmly, and make it water tight. Near the bottom, at A, is a hole and plug, to let off water; and at B, a tin tube, soldered in the upper part of the outside, to pour water in. When used, the box is to be filled half full of water, about blood warmth. Then a woollen blanket and pillow are laid upon the India rubber cloth, and the patient laid on them, and he will float as he would in water, and there will be no pressure on any part of the body greater than is felt when the body is in water.

This is important for all who suffer from bed sores, or sloughing in protracted fevers, from diseases in the hip-joint, from diseases of the spine, lingering consumption, and all diseases that compel to a protracted recumbent position. None but those who have seen, or experienced the relief and comfort secured to sufferers by this bed, can conceive of its value. The writer saw the case of a young man, who was enduring indescribable tortures with the most dreadful ulcers all over his body, and who had for several days and nights been unable to sleep, from extreme suffering. This bed was made for him, as an experiment, after trying every other mode of relief in vain. It was placed by his bedside, and the water poured in, and then his friends raised him with the greatest care in a blanket, and laid him on it. Instantly his groans ceased, an expression of relief and delight stole over his countenance, and exhausted nature sunk instantly into the most peaceful and protracted slumbers. And ever after, he was relieved from his former sufferings. Every hospital, every alms-house, and every village should have the means of obtaining such a bed for the many classes of sufferers who would thus find relief, and it is *woman* who should interest herself to secure such a comfort for the sick, who especially are commended to her benevolent ministries.

Equal Opportunity

To the Editor: The very essence of the scientific approach to life is to question, to demand proof, to require evidence, to be critical of, in other words, absolute freedom of speech. Without this approach, one tends to accept dogma, authority and tradition.

Modern medicine owes its effective knowledge and techniques to the scientific method. Modern medicine has arisen out of the superstition and witchcraft of the past.

It is the duty of all doctors to assist and develop the scientific method.

Yet there are publications such as the *Journal of the American Medical Association*, the *California Medical Journal* and the *Bulletin of the Sacramento Society for Medical Improvement*, which deny freedom of expression to those members who are critical of the policy of these organizations.

It is my contention that these publications ought to allow freedom of speech to all members, not just a select few. Any contribution by any member of the medical association ought to be welcomed and particularly those which are critical of the actions or policies of the organization. Any organization does not gain strength through idle flattery, but rather through the free action of free men.

In an organization where the dues and assessments are equal, the rights and privileges ought to be equal.

It is conceivable, nay it is probable, that the novelty of and the sudden confrontation with this concept of freedom of speech for each ordinary dues paying doctor may be so alarming to our inbred medical hierarchy that all kinds of terrible specters will be conjectured to abort such an idea. One such objection may be that to allow all members full freedom to use the columns of the journals will lead to their inundation with innumerable contributions necessitating new funds for expansion. To this I have two answers: (1) I doubt if there is enough interest or originality left in most physicians to